| PATENT APPLICATION RECORD En 3 December 8, 2004                          |                                                                               |                                                                                                |                                                                          |                                       |                      |                               |            |                     | Application or Docket Number 10/536648 |            |                     |                        |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------------------|----------------------|-------------------------------|------------|---------------------|----------------------------------------|------------|---------------------|------------------------|
|                                                                          |                                                                               | CLAIMS /                                                                                       | (Column 1)                                                               |                                       | (Column 2)           |                               |            | SMALL ENT           |                                        | OR         | OTHER<br>SMALL      | THAN .                 |
| U.S                                                                      | . NATIONAL                                                                    | STAGE FEES                                                                                     |                                                                          |                                       |                      |                               | 1          | RATE                | FEE                                    | ]          | RATE                | FEE                    |
| BAS                                                                      | SIC FEE                                                                       |                                                                                                | SMALL ENT. = \$ 150                                                      |                                       | LARC                 | GE ENT. = \$ 300              | 1          | BASIC FEE           |                                        | OR         | BASIC FEE           | 300                    |
| EXA                                                                      | MINATION FE                                                                   | E .                                                                                            | Satisfies PCT Article 33(1)-<br>(4) = \$50 / \$ 100                      |                                       |                      | her situations = 100 / \$ 200 | 1          | EXAM. FEE           |                                        | 1          | EXAM. FEE           | 200                    |
| SEARCH FEE                                                               |                                                                               |                                                                                                | U.S. is ISA = \$ 50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |                                       |                      | her situations = 250 / \$ 500 |            | SEARCH FEE          |                                        |            | SEARCH FEE          | 400                    |
| FEE                                                                      | FOR EXTRA S                                                                   | SPEC. PGS.                                                                                     | minus 100 =                                                              |                                       |                      | /50 = .                       |            | X \$ 125 =          |                                        |            | X \$ 250 =          | 100                    |
| TO1                                                                      | AL CHARGEA                                                                    | BLE CLAIMS                                                                                     | 4/ min                                                                   | us 20 = .                             | ć                    | 2/                            |            | X \$ 25 =           |                                        | OR         | X \$ 50 =           | 1050                   |
| IND                                                                      | EPENDENT CL                                                                   | AIMS                                                                                           | 3 min                                                                    | nuis 3 = .                            |                      |                               |            | X \$ 100 =          |                                        | OR         | X \$ 200 =          | ruce                   |
| MUL                                                                      | TIPLE DEPEN                                                                   | DENT CLAIM PR                                                                                  | ESENT                                                                    |                                       |                      |                               |            | +\$ 180 =           |                                        | OR         | + \$ 360 =          |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |                                                                               |                                                                                                |                                                                          |                                       |                      |                               | 2 :        | TOTAL               |                                        | OR         | TOTAL               | 1950                   |
|                                                                          | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  CLAIMS HIGHEST |                                                                                                |                                                                          |                                       |                      |                               | <b>i</b> [ | SMALL E             |                                        |            |                     |                        |
| AMENDMENT A                                                              | 5/10                                                                          | REMAINING<br>AFTER<br>AMENDMENT                                                                |                                                                          | PREVIOU<br>PAID FI                    | USLY                 | PRESENT<br>EXTRA              |            | RATE                | TIONAL                                 |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|                                                                          | Total                                                                         | 1 41                                                                                           | Minus                                                                    | <u> </u>                              |                      | • —                           |            | X \$ 25 =           |                                        | OR         | X \$ 50 =           |                        |
|                                                                          | Independent                                                                   | 1 2                                                                                            | ivalus                                                                   | ··· 3                                 | 3                    | =                             |            | X \$ 100 =          |                                        | OR         | X \$ 200 =          |                        |
|                                                                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                |                                                                                                |                                                                          |                                       |                      |                               | +\$ 180 =  |                     | OR                                     | + \$ 360 = |                     |                        |
|                                                                          |                                                                               |                                                                                                |                                                                          |                                       |                      |                               |            | TOTAL ADDIT.<br>FEE |                                        | OR         | TOTAL ADDIT.        |                        |
|                                                                          |                                                                               | (Column 1)                                                                                     |                                                                          | (Column                               | n 2)                 | (Column 3)                    |            |                     |                                        | •          |                     |                        |
| AMENDMENT B                                                              |                                                                               | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                                      |                                                                          | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | er<br>Isly           | PRESENT<br>EXTRA              |            | RATE                | ADDI-<br>TIONAL<br>FEE                 |            | RATE .              | ADDI-<br>TIONAL<br>FEE |
|                                                                          | Total                                                                         | •                                                                                              | Minus                                                                    | **                                    |                      | <b>=</b> .                    |            | X\$25=              |                                        | OR         | X \$ 50 =           |                        |
| AME                                                                      | Independent                                                                   | •                                                                                              | Minus                                                                    | •••                                   |                      | =                             |            | X \$ 100 =          |                                        | ÖR         | X \$ 200 =          |                        |
|                                                                          | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                |                                                                                                |                                                                          |                                       |                      |                               | ١,         | +\$ 180=            |                                        | OR         | +\$ 360 =           |                        |
|                                                                          | •                                                                             |                                                                                                |                                                                          |                                       |                      |                               |            | TOTAL ADDIT.<br>FEE |                                        | OR         | TOTAL ADDIȚ.<br>FEE |                        |
| ***                                                                      | V the "Highest Nu:<br>V the "Highest Nu:                                      | imin 1 is less than the<br>mber Previously Pak<br>mber Previously Paid<br>nber Previously Paid | d For in this spa<br>d For in this spa                                   | CE is less to<br>CE is less to        | han '20'<br>han '3', | r, enter "20".<br>enter "3".  | <b>.</b>   |                     |                                        |            |                     |                        |